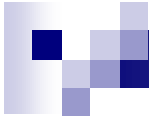




# Bioterrorism

Public Health and Hospital  
Preparedness



## Wake of September 11, 2001 . . .

- Attention focused on the ability of hospitals, emergency medical services (EMS) systems, and public health to respond to bioterrorist events



# Survey of Rural and Urban ER's

- None of rural respondents believed their hospitals were prepared for biological weapons incidents
- Most urban respondents felt only partially prepared
- None of the rural sites had decontamination stations that could accommodate 10 – 15 casualties at once
- Of the larger hospitals, only 10% could manage 50 – 100 mass casualty patients



# Agents Most Likely Associated with Bioterrorism

- Anthrax
- Botulism
- Smallpox
- Plague
- Tularemia
- Hemorrhagic fevers (Ebola, Marburg)



# Other Potential Agents

- Brucellosis
- Glanders
- Hanta Virus
- Western equine encephalomyelitis
- Drug Resistant Tuberculosis
- Shigella, Salmonella, E coli 0157:H7, etc.  
*moderate morbidity, low mortality*



# Idaho's Response to Anthrax

## October through December 2001

### **State EMS Communications Center**

--133 calls

### **State Public Health Laboratory**

-- 50 samples tested (none positive)

### **District Health Departments**

- 11 suspect cases investigated (7 postal workers)
- began carrying pagers for 24 X 7 response



# Federal Funding to Enhance Preparedness

## **Federal Emergency Management Agency**

- \$3.5 billion – base \$15 million/state -1<sup>st</sup> responders
- Equipment, training, exercises

## **Department of Justice**

- \$301 million – Idaho = \$1,040,000 - 1<sup>st</sup> responders
- Equipment, training, exercises

## **U.S. Department of Agriculture**

- \$43.5 million – Idaho = \$376,344
- State surveillance, response, plant surveillance



# Federal Funding - continued

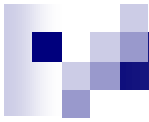
## **Health Resources and Services Administration**

\$125 million: Idaho = \$751,285 for hospital  
planning, equipment  
Ends March 31, 2003

## **Centers for Disease Control and Prevention**

\$915 million: Idaho = \$7,880,688 for public  
health planning, surveillance &  
epi., communications, training  
Ends August 30, 2003





# HRSA Hospital Preparedness

- Assess capacity to respond to outbreaks patient triage, isolation, mass care, etc.
- Develop hospital- and regional-specific response, communication, training plans
- Coordinate planning with public health and other health care resources
- Grants to priority hospitals to enhance capacity to respond



# Idaho's Hospital Preparedness Program

- Contract with Idaho Hospital Association - \$748,530 total
- IHA Subcontracts with hospitals (\$629,303):
  - Upgrade hospitals' abilities to respond to biological events (\$329,303)
  - Develop communication and reporting system (\$200,000)
  - Develop medicine distribution system (\$100,000)



# District Health Department Role in Hospital Preparedness Planning

- Coordination of public health planning with hospital planning to create an integrated system response to infectious disease outbreaks



# CDC Public Health Preparedness Cooperative Agreement Focus – District Health Departments

- **Public Health Assessment and Planning -- Jane Smith RN**  
(\$.6 S/\$1.2 DH = \$1.8)  
Plans that describe how public health will: identify disease, investigate source and prevent spread, provide training, distribute mass meds, communicate with providers and public
- **Surveillance and Epidemiology Capacity -- Christine Hahn MD**  
(\$1.5 S/\$.5 DH = \$2.0)  
Develop electronic disease reporting system, increase epidemiology capacity
- **Laboratory Capacity – Richard Hudson PhD**  
(\$1.7)  
Create bio-secure laboratory environment, enhance lab staffing and equipment to perform analysis



# CDC Public Health Preparedness - continued

- **Electronic Disease Reporting System/Health Alert Network**  
(\$ .7 S/\$ .5 DH = \$1.2)  
EMS StateComm Center and district health capacity to respond to electronically reported diseases 24X7
- **Communication of Health Information** – Jane Smith RN  
(\$ .4 DH)  
Information officers for district health
- **Education & Training** -- Jane Smith RN  
(\$ .38 S/\$ .38 DH = \$.76)  
Training for public health staff



# Total Public Health Infrastructure Enhancements

## **State**

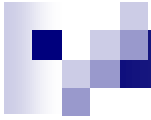
13 FTEs

\$4.88 million (\$3.5 contracts and equipment)

## **District Health Departments**

42 FTEs

\$2.99 Million



# Questions?